FINAL REPORT Extended Year for Special Educators - Special Educator Stipends

Date:	School District/Charter School:
Name of Person Preparing Report:	
Please provide the following information for your district/charter school:	
Total number of special education teachers (preschool): FTEs	
Total number of special education teachers (school age): FTEs	
Total number of speech-language pathologists: FTEs	
Number of special educators who opted to work extended year days:	
Special educa	tion teachers (preschool): FTEs
Special educa	ition teachers (school age): FTEs
Speech-langu	age pathologists: FTEs
Total number of extended year days special educators worked:	
Special education teachers (preschool):	
Special education teachers (school age):	
Speech-language pathologists:	
Types of Duties Performed: (Please check all that apply)	
☐ IEP relate	ed duties
Records	maintenance
File preparation	
Report preparation	
Assessment related duties	
Conferring with parents	
Other pa	perwork related to the implementation of IDEA
The final report is due on or before June 30	
Please submit to: Cal Newbold, Utah State Office of Education, Special Education Section E-mail: <u>cal.newbold@schools.utah.gov</u> - FAX: 801-538-7991	